

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 380 OF 392

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF JOHN MCCAIN, INC.

Full Name (Last, First, Middle Initial)

A. MD COMPTROLLER

Mailing Address 80 CALVERT ST

City State Zip Code
ANNAPOLIS MD 21401

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2015

Amount of Each Disbursement this Period

285.91

Transaction ID : SB17.102

B. MD COMPTROLLER

Mailing Address 80 CALVERT ST

City State Zip Code
ANNAPOLIS MD 21401

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Amount of Each Disbursement this Period

285.91

Transaction ID : SB17.103

C. MD COMPTROLLER

Mailing Address 80 CALVERT ST

City State Zip Code
ANNAPOLIS MD 21401

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2015

Amount of Each Disbursement this Period

285.91

Transaction ID : SB17.104

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

857.73